Human Services Reporting System

Overview

HSRS General

- Counties input data on clients they serve and the services provided with some data on costs (350,000+ clients per year)
- Each client has a record
- Most counties enter daily or weekly
- State requires monthly or quarterly
- Unique Client ID

HSRS Input

- Methods to input data
 - Key into on-line screens
 - File Transfer Internet method to transmit files from county computer system to state
 - Vendor interface
 - Tools: HSRS Handbook, Terminal Operators Guide, Forms, Deskcards

HSRS Target Groups

- Eight major client groups:
 - DD
 - -MH
 - AODA
 - Physical Disability
 - Elderly
 - 3 Child Welfare Groups

HSRS Modules

- CORE basic data only
- Modules more detailed data on:

- AODA

- SC

-MH

-Adoption

- LTS
- Supported Employment
- Birth to 3
- Family Support

HSRS Expenditure Data

- Expenditure Data
 - may be client specific LTS, Family Support,
 Substitute Care
 - or summary data prepared by county by target group and service cluster
 - state totals are over \$1 billion per year

HSRS PURPOSES

- Federal Funding
 - Federal reports: bring \$400 million to WI annually
 - AODA and Mental Health block grant reports
 - AFCARS client files
 - AODA client files
 - MA Waiver claims
 - Others (B-3, SSBG, Title IV-E claims, Title I)

HSRS PURPOSES

- State Reports: required by statute, used for program planning, used for budgeting, used for program monitoring, etc.
- County reports 40+ reports case listings,
 tickler reports, summaries
- Some counties use; others get reports from county systems

HSRS Linkages

- Linkages/Input to other systems
 - KIDS
 - Reports to Help Load WiSACWIS
 - MEDS Link for LTS, MH, and AODA
 - MEDS link allows a combined view with
 MMIS data can look at total services and costs

HSRS Features for Counties

- Client Input Screens
- Client Inquiry Screens
- Next Screen Function
- Full Client Print
- Online Viewing of Reports
- Optional Data Elements

HSRS Features for Data Users

- Single System for Numerous Client Groups
- Single Client ID Enables Unduplicated Counts
- MEDS Interface Enables Combining Data with MMIS
- Standard Reports Summarize Across Disabilities

STRENGTHS/WEAKNESSES

- Old System since 1987 old technology but gives consistent data over time
- Meets numerous requirements at relatively low cost (brings federal funding of \$400 million to WI) - does not have many features users want
- Needs more user friendly access to reports
- Some counties want more features, others want less

STRENGTHS/WEAKNESSES

- Counties would like web based
- File Transfer System allows counties to transfer data from local systems without double entry
- Burden for counties
- Needs more compatibility with other systems

FUTURE

- WiSACWIS replaces SC Module and Adoptions Module
- Greater use of MEDS data to get bigger picture
- Look for improved input methods can we merge with other systems, improve File Transfer methods, web access, etc.?

FUTURE

- Look for improved data access methods more user friendly access to reports
- Emphasis on outcome measures
- Greater emphasis on quality of data and expanded use of data - as we combine data/systems, we need to be sure we have good data